I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

The

pated: 11/3/08 Signature: Jone Ryan

Docket No.: MIY-P01-024

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Chu et al.

Application No.: 10/642,395

Confirmation No.: 2643

Filed: August 14, 2003

Art Unit: 3773

For: SYSTEMS, METHODS AND DEVICES

RELATING TO DELIVERY OF MEDICAL

IMPLANTS

Examiner: M. K. Ryckman

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (SIDS)

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO/SB/08. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

This Supplemental Information Disclosure Statement is filed more than three months after the U.S. filing date, OR more than three months after the date of entry of the national stage of a PCT application, AND after the mailing date of the first Office Action on the merits, whichever occurs first, but before the mailing date of a Final Office Action or Notice of Allowance (37 CFR 1.97(c)).

11/05/2008 MRELETE1 00000018 181945 10642395 01 FC:1806 180.00 DA Application No.: 10/642,395 Docket No.: MIY-P01-024

In accordance with 37 CFR 1.98(a)(2)(ii), Applicant has not submitted copies of U.S. patents and U.S. patent applications. Applicant submits herewith copies of foreign patents and non-patent literature in accordance with 37 CFR 1.98(a)(2).

In accordance with 37 CFR 1.97(g), the filing of this Supplemental Information Disclosure Statement shall not be construed to mean that a search has been made or that no other material information as defined in 37 CFR 1.56(a) exists. In accordance with 37 CFR 1.97(h), the filing of this Supplemental Information Disclosure Statement shall not be construed to be an admission that any patent, publication or other information referred to therein is "prior art" for this invention unless specifically designated as such.

It is submitted that the Supplemental Information Disclosure Statement is in compliance with 37 CFR 1.98 and the Examiner is respectfully requested to consider the listed references.

Please charge our Deposit Account No. 18-1945 in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 18-1945, under Order No. MIY-P01-024.

Dated: November 3, 2008

Respectfully submitted,

Jong Min Park

Registration No.: 63,389

ROPES & GRAY LLP

One International Place

Boston, Massachusetts 02110

(617) 951-7000

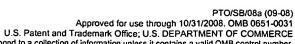
(617) 951-7050 (Fax)

Attorneys/Agents For Applicant

PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

| Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00 SUBMITTED BY | Under the Paperwo | rk Reduction Act o | t 1995, no person are re | uired to respond to a c | | | isplays a valid OMB control nu |
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| FEE TRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 180.00 Attorney Docket No. MIY-P01-024 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (pless identify): Deposit Account Deposit Account Number: Boposit Account of Peposit Account Number: See Classification of Payment (and the state of the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fee (\$ | | | | | | | <u>n</u> |
| For FY 2009 First Named Inventor Michael S. H., Chu Examiner Name Michael S. H., Chu Michael S. H | | | | | | | 12 |
| Applicant claims small entity status. See 37 CFR 1.27 | PEE IR | ANSIVI | HAL | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$1 180.00 Attorney Docket No. MIY-P01-024 METHOD OF PAYMENT (check all that apply) Check | For | FY 2009 | 9 | | | | |
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| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below | | | | one Other | (please identify | · | |
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| Design 220 | Application Type | | | | Fee (\$) | | Fees Paid (\$) |
| Plant | Utility | 330 | 165 54 | 270 | 220 | 110 | |
| Reissue 330 165 540 270 650 325 Provisional 220 110 0 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Total Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Registration No. (Altomey/Agent) 63,389 Telephone (617) 951-7000 | Design | 220 | 110 10 | 50 | 140 | 70 | |
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| Registration No. (Altorney/Agent) 63,389 Telephone (617) 951-7000 | | | | | isclosure | Statement | 180.00 |
| Registration No. (Altorney/Agent) 63,389 Telephone (617) 951-7000 | SUBMITTED BY / | 10 | | | _ | | |
| (meme)// igon) | Signature | In | | | 63,389 | Telephone | (617) 951-7000 |
| | Name (Print/Type) Jong Mi | n Park | | I (mome) myen) | | Date | |

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| | | | | Application Number | 10/642,395 | | |
| 11 | NFORMATION | 1 DI | SCLOSURE | Filing Date | August 14, 2003 | | |
| STATEMENT BY APPLICANT | | | APPLICANT | First Named Inventor | Michael S. H. Chu | | |
| | | | | Art Unit | 3773 | | |
| | (Use as many sh | eets as | necessary) | Examiner Name | M. K. Ryckman | | |
| Sheet | 1 | of | 2 | Attorney Docket Number | MIY-P01-024 | | |

| | U.S. PATENT DOCUMENTS | | | | | | | |
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| Examiner | Cite | Document Number | Publication Date | Name of Patentee or | Pages, Columns, Lines, Where | | | |
| Initials* | No.1 | Number-Kind Code ² (if known) | MM-DD-YYYY | Applicant of Cited Document | Relevant Passages or Relevant Figures Appear | | | |
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| Examiner | Cito | Foreign Patent Document | Publication | Name of Patentee or | Pages, Columns, Lines, | | | |
| Initials* | Cite No.1 | Country Code ³ -Number ⁴ -Kind Code ⁵ (ii known) | Date MM-DD-YYYY | Applicant of Cited Document | Where Relevant Passages Or Relevant Figures Appear | Τ ⁶ | | |
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| | BL | WO-0219945 | 03-14-2002 | American Medical Systems, Inc. | | | | |
| | | | | | | | | |

| Examiner | Date | |
|-----------|------------|--|
| Signature | Considered | |

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PTO/SB/08b (09-08)

Approved for use through 10/31/2008. OMB 0551-0031

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| | | | | | 10/642,395 | |
| 11 | NFORMATION | N DI | SCLOSURE | Filing Date | August 14, 2003 | |
| S | STATEMENT BY APPLICANT | | | First Named Inventor | Michael S. H. Chu | |
| | | | | Art Unit | 3773 | |
| (Use as many sheets as necessary) | | Examiner Name | M. K. Ryckman | | | |
| Sheet | 2 | of | 2 | Attorney Docket Number | MIY-P01-024 | |

| | | NON PATENT LITERATURE DOCUMENTS | |
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| Examiner Initials | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
| | C42 | Copy of European Search Report Dated September 29, 2006 from corresponding Application EP 05 02 5122 | |

| E | 15. | |
|-----------|------------|--|
| Examiner | Date | |
| Signature | Considered | |
| | | |

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Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.